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CONFIRMATION NO. 1542

SERIAL NUMBER 10/780,476	FILING or 371(c) DATE 02/16/2004 RULE	CLASS 600	GROUP ART UNIT 3736	ATTORNEY DOCKET NO.	
APPLICANTS John I. M. Choate, Seminole, OK; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY ** 05/10/2004					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /JEFFREY GERBEN HOEKSTRA/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	STATE OR COUNTRY OK	SHEETS DRAWINGS 0	TOTAL CLAIMS 12	INDEPENDENT CLAIMS 2
ADDRESS John Choate PO Box 9949 Arlington, VA 22219-1949 UNITED STATES					
TITLE METHOD TO REDUCE INFLAMMATION AND TACTILE FINGER SENSATION DEFICIT DUE TO CARPAL TUNNEL SYNDROME OR ARTHRITIS					
FILING FEE RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		